**TABLE OF CHANGES – FORM/INSTRUCTIONS**

**Form** **G-1450, Authorization for Credit Card Transactions**

**OMB Number: 1615-0131**

**11/17/2017**

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| **Reason for Revision:** To include new credit card language and SL |

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| **Current Page Number and Section** | **Current Text** | **Proposed Text** |
| **New** | [New] | **[Page 1]**  **What Is the Purpose of Form G-1450?**  Use Form G-1450, Authorization for Credit Card Transactions, to pay the filing fee and biometric services fee (if applicable) by credit card for an application, petition, or request that you are filing with a U.S. Citizenship and Immigration Services (USCIS) Lockbox. |
| **Page 1,**  **General Information** | Complete the "**Applicant's Information**," "**Credit Card Billing Information**," and "**Credit Card Information**" sections and sign the authorization.  U.S. Citizenship and Immigration Services (USCIS) cannot process credit card payments without an authorized signature. Failure to provide the requested information may result in USCIS and your financial institution not accepting the payment.  **[moved up]**  **[new]** | **[Page 1]**  **General Instructions**  USCIS provides forms free of charge through the USCIS website. In order to view, print, or fill out our forms, you should use the latest version of Adobe Reader, which you can download for free at [**http://get.adobe.com/reader/**](http://get.adobe.com/reader/). If you do not have Internet access, you may call the USCIS National Customer Service Center at **1-800-375-5283** and ask that we mail a form to you. For TTY (deaf or hard of hearing) call: **1-800-767-1833**.  **Signature.** Each Form G-1450 must be properly signed and filed. For all signatures on this form, USCIS will not accept a stamped or typewritten name in place of a signature.  **How To Fill Out Form G-1450**  **1.** Type or print legibly in black ink.  **2.** Complete the "**Applicant's/Petitioner’s/Requester’s Information**," "**Credit Card Billing Information**," and "**Credit Card Information**" sections and sign the authorization.  **3.** Place your Form G-1450 ON TOP of your application, petition, or request package.  **NOTE:** Failure to provide the requested information may result in USCIS and your financial institution not accepting the payment. USCIS cannot process credit card payments without an authorized signature.  **NOTE:** Form G-1450 may only be used with a form being submitted to a USCIS Lockbox.  **Do not submit this form to a USCIS Field Office. They will not accept it.**  **Applicant’s/Petitioner’s/Requester’s Information (Full Legal Name)**  Given Name (First Name)  Middle Name (if any)  Family Name (Last Name)  **Credit Card Billing Information (Credit Card Holder’s Name as it Appears on the Card)**  Given Name (First Name)  Middle Name (if any)  Family Name (Last Name)  **Credit Card Holder’s Billing Address:**  Street Number and Name  Apt. Ste. Flr. Number  City or Town  State  ZIP Code  **Credit Card Holder’s Signature and Contact Information:**  Credit Card Holder’s Signature  Credit Card Holder’s Daytime Telephone Number  Credit Card Holder’s Email Address  **Credit Card Information**  Credit Card Number  Credit Card Expiration Date (mm/yyyy)  **Credit Card Type:**  Visa  MasterCard  American Express  Discover  Authorized Payment Amount $\_\_\_.00  **[Page 2]**  **We recommend that you print or save a copy of your completed Form G-1450 to review in the future and for your records.**  **Notice to Those Making Payment by Credit Card**  If you submit Form G-1450, USCIS will use the information you provide to process a credit card payment through the U.S. Department of Treasury Pay.gov Trusted Collections Service (TCS). TCS is a web-based application that allows Government agencies to process payments by credit or debit cards.  After USCIS processes your Form G-1450, **we will destroy your authorization**, regardless if USCIS approves or denies your application, petition, or request. USCIS will reject your application, petition, or request for lack of payment if your credit card is declined. USCIS will not attempt to process your credit card payment a second time. |
| **Page 1,**  **Applicant’s Information (Applicant’s Full Legal Name)** | **[Page 1]**  **Applicant’s Information (Applicant’s Full Legal Name)**  Given Name (First Name)  Middle Name (if any)  Family Name (Last Name)  **Credit Card Billing Information (Credit Card Holder’s Name as it Appears on the Card)**  Given Name (First Name)  Middle Name (if any)  Family Name (Last Name)  **Credit Card Holder’s Billing Address:**  Street Number and Name  Apt. Ste. Flr. Number  City or Town  State  ZIP Code  **Credit Card Holder’s Signature and Contact Information:**  Credit Card Holder’s Signature  Credit Card Holder’s Daytime Telephone Number  Credit Card Holder’s Email Address  **Credit Card Information**  Credit Card Number  Credit Card Expiration Date (mm/yyyy)  **Credit Card Type:**  Visa  MasterCard  American Express  Discover  Authorized Payment Amount $\_\_\_.00 | **[moved up]** |
| **Page 1,**  **USCIS Privacy Act Statement** | **[Page 1]**  **USCIS Privacy Act Statement**  **AUTHORITIES:** The information requested on this authorization, and the associated evidence, is collected under section 286(m) of the Immigration and Nationality Act, 8 U.S.C. 1356(m)*.*  **PURPOSE:** The primary purpose for providing the requested information is to authorize the USCIS Lockbox to make an electronic credit card payment in Pay.gov, which is owned and operated by the Department of Treasury, for the filing fee and biometric services fee associated with a benefit request form. USCIS will process your case when the payment is received in full.  **DISCLOSURE:** The information you provide is voluntary. However, failure to make a payment towards the associated benefit request filing fee and biometric services fee may delay or prevent USCIS from accepting your benefit request form.  **ROUTINE USES:** This information may be used by and disclosed to USCIS personnel and contractors or other agents who need the information to assist in activities related to processing associated fees. Additionally, USCIS may disclose the information to other Federal, state, local, and authorized organizations in accordance with approved routine uses, as described in the associated published system of records notice [TREASURY/FMS.017 - Collections Records --Treasury/Financial Management Service, which can be found at [**http://www.treasury.gov/privacy**](http://www.treasury.gov/privacy), and DHS-USCIS-007 - Benefits Information System, available at [**www.dhs.gov/privacy**](file:///C:/Users/jlhoots/AppData/Local/Microsoft/Windows/Temp\hich\af0\dbch\af37\loch\f0%20orary%20Internet%20Files/Content.Outlook/A0US0VOK/www.dhs.gov/privacy)]. The information may also be made available, as appropriate, for law enforcement purposes or in the interest of national security. | **[Page 2]**  **DHS Privacy Notice**  **AUTHORITIES:** The information requested on this form is collected pursuant to Section 286(m) of the Immigration and Nationality Act, 8 U.S.C. 1356(m)*.*  **PURPOSE:**  The primary purpose for providing the requested information is to authorize the USCIS Lockbox to make an electronic credit card payment in Pay.gov, which is owned and operated by the Department of Treasury, for the filing fee and biometric services fee associated with a benefit request form. DHS processes your case when the payment is received in full.  [No Change]  **ROUTINE USES:** DHS may share the information you provide on this form to USCIS personnel and contractors or other agents who need the information to assist in activities related to processing associated fees. Additionally, USCIS may disclose the information to other Federal, state, local and authorized organizations. DHS follows approved routine uses described in the associated published system of records notices [DHS/USCIS/ICE/CBP-001 - Alien File, Index, and National File Tracking, DHS-USCIS-007 - Benefits Information System] and published privacy impact assessments [DHS/USCIS/PIA-061 Benefit Request Intake Process], available at **www.dhs.gov/privacy**. DHS may also share this information, as appropriate, for law enforcement purposes or in the interest of national security. |
| **Page 1,**  **Paperwork Reduction Act** | **[Page 1]**  **Paperwork Reduction Act**  An agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated at 5 minutes per response, including the time for reviewing instructions and completing and submitting the authorization. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Ave, NW, Washington, DC 20529-2140; OMB No. 1615-0131. **Do not mail your completed Form G-1450 to this address.** | **[Page 2]**  **Paperwork Reduction Act**  An agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid Office of Management and Budget (OMB) control number. The public reporting burden for this collection of information is estimated at 7 minutes per response, including the time for reviewing instructions and completing and submitting the authorization. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Ave, NW, Washington, DC 20529-2140; OMB No. 1615-0131. **Do not mail your completed Form G-1450 to this address.** |